

**AUTHORIZED UTILITY REPRESENTATIVE FORM FOR THE TELECOMMUNICATIONS CARRIERS**  
TYPE:    ☐ IXC        ☒ CLEC        ☐ ILEC        ☐ Wireless

227837

2011 29 H

**CERTIFICATED COMPANY INFORMATION**

DialTone & More, Inc.

FEIN/SSN:

Company Name

Telephone #: 678-436-5590

Db/a/fka

3483 Satellite Blvd., Suite 202

Mailing Address:

Duluth

GA

30096-5800

City, State, Zip Code

6905 N. Wickham Road Suite 403

Business Location

Melbourne

FL

32940-0000

City, State, Zip Code

County:

**REGISTERED AGENT INFORMATION**

Registered Agent: National Registered Agents, Inc.

Mailing Address: 2 Office Park Court. Suite 103

Columbia

SC

29223-0000

City, State, Zip Code

**Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:**

- A.    Thomas                      Biddix                      **Business Location Address**  
**General Manager** (Include Address if Different than above)  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone Number    /    Facsimile Number    /    E-mail Address
- B.    **Business Location Address**  
**Customer Relations/Complaints Representative** (Include Address if Different than above)  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone Number    /    Facsimile Number    /    E-mail Address
- C1.    **Business Location Address**  
**Customer Relations/Complaints Representative for Escalated Complaints** (Include Address if different than above)  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone Number    /    Facsimile Number    /    E-mail Address

S. C. PUBLIC SERVICE COMMISSION

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E. **Test and Repair** (Include Address if Different than above)

- / - /  
Telephone Number / Facsimile Number / E-mail Address

F. **Emergencies** (During Non-Office Hours)

- / - /  
Telephone Number / Facsimile Number / E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Lisa Brown **Mailing Address**  
**Regulatory Officer** (Included Address if Different Address if different than above)  
678-436-5590 / 678-802-3483 / lbrown@rtcllc.net  
Telephone Number / Facsimile Number / E-mail Address

H. Lisa Brown  
**Dual Party Mailings (Name)**

(Mailing Address)  
678-436-5590 / 678-802-3483 / lbrown@rtcllc.net  
Telephone Number / Facsimile Number / E-mail Address

I. Lisa Brown  
**Interim LEC Fund Mailing (Name)**

(Mailing Address)  
678-436-5590 / 678-802-3483 / lbrown@rtcllc.net  
Telephone Number / Facsimile Number / E-mail Address

J. Lisa Brown  
**Universal Service Fund Mailings (Name)**

(Mailing Address)  
678-436-5590 / 678-802-3483 / lbrown@rtcllc.net  
Telephone Number / Facsimile Number / E-mail Address

K. Lisa Brown  
**Gross Receipts Mailings (Name)**

(Mailing Address)  
678-436-5590 / 678-802-3483 / lbrown@rtcllc.net  
Telephone Number / Facsimile Number / E-mail Address

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Lisa Brown / *Lisa Brown*  
**This form was completed by** **Signature**  
Account Manager / 1/20/2011  
**Title** **Date**

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Docketing Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211  
And  
Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street  
Columbia, South Carolina 29201